

Fill in this information to identify the case and this filing:

Debtor Name Las Vegas Monorail Company a Nevada non-profit corporation
 United States Bankruptcy Court for the _____ District of Nevada
 (State)
 Case number (if known) 20-14451-nmc

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-Individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation, a member or an authorized agent of the partnership, or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct.

- ☒ *Schedule A/B Assets-Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 09/21/2020
 MM / DD / YYYY

X /s/ Curtis L. Myles III

Signature of individual signing on behalf of debtor

Curtis L. Myles III

Printed name

President and CEO of Las Vegas Monorail Company

Position or relationship to debtor

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>196,828,023.40</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>196,828,023.40</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>20,650,000.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>2,145,541.17</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>22,795,541.17</u>

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest**

2.	Cash on hand	<u>\$1,550.00</u>
2.	Cash on hand	<u>\$4,796.54</u>
2.	Cash on hand	<u>\$4,707.00</u>
2.	Cash on hand	<u>\$800.00</u>

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1.	<u>Bank of Nevada; Operating Fund</u>	<u></u>	<u>\$1,206,425.39</u>
3.2.	<u>Bank of Nevada; Debit Card Fund</u>	<u></u>	<u>Unknown</u>
3.3.	<u>Bank of Nevada; Payroll Fund</u>	<u></u>	<u>Unknown</u>
3.4.	<u>Bank of Nevada; Collection Fund</u>	<u></u>	<u>Unknown</u>

Debtor Las Vegas Monorail Company
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3.5.	Bank of Nevada; Reimbursement Account			Unknown
3.6.	Wells Fargo; Removal Fund			\$6,762,077.47
3.7.	UMB Bank; Revenue Fund; 150601.1			Unknown
3.8.	UMB Bank; Construction Fund; 150601.2			Unknown
3.9.	UMB Bank; Debt Service Interest Fund; 150601.3			\$135,825.00
3.10	UMB Bank; Debt Service Principal Fund; 150601.4			Unknown
3.11	UMB Bank; Debt Service Reserve Fund; 150601.5			\$1,704,725.00
3.12	UMB Bank; Supplemental Reserve Fund; 150601.6			Unknown
3.13	UMB Bank; Operating Reserve Fund; 150601.7			\$418,230.37
3.14	UMB Bank; Capital Expenditure Fund; 150601.8			\$250,000.00
3.15	UMB Bank; Cost of Issuance Fund 150601.9			\$72,872.31

4. **Other cash equivalents (Identify all)**5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$10,562,009.08**Part 2: Deposits and Prepayments**6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 2

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Description, including name of holder of deposit

7.1. Security deposit for Office Lease \$38,035.387.2. Retainers for Bankruptcy Professionals \$687,262.508. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment8.1. OTN Systems - December 2020 / 2021 Prepayments \$6,300.008.2. Prepaid Expenses - Insurance \$707,803.648.3. Prepaid Land Lease - Sahara Maintenance yard \$1,202,236.978.4. Billboard Purchase Option \$125,000.009. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$2,766,638.49**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

☐ No. Go to Part 4.☒ Yes Fill in the information below.11. **Accounts receivable**11a. 90 days old or less: 10,401.31 - 0.00 = \$10,401.31
face amount doubtful or uncollectible accounts11a. 90 days old or less: 1,269.09 - 0.00 = \$1,269.09
face amount doubtful or uncollectible accounts11a. 90 days old or less: -158.00 - 0.00 = \$-158.00
face amount doubtful or uncollectible accounts12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$11,512.40**Part 4: Investments**

13. Does the debtor own any investments?

Debtor **Las Vegas Monorail Company**
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- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
	TVM Ticket Stock		\$0.00		Unknown

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$0.00

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

Debtor **Las Vegas Monorail Company**
NameCase number (If known) **20-14451-nmc**

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)			
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Expansion In Progress (Phase II) (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$309,414.17
Expansion in Progress (West) (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$10,136,477.63
Capital Asset Replacement (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$32,217.00
Monorail Guideway (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$133,482,042.00
Property Right of Way (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$5,735,487.24
Utility Relocation (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$8,211,805.00
Monorail Trains (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$24,400,469.00
Monorail Electronic System (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$0.00
Traction Power Systems (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00		\$0.00

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Communication Systems (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.00
Platform Doors (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.00
Guideway Elements (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.00
Monorail TVMs / ETicket Kiosks (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.36
Monorail Faregate System (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.00
Fare System-PCI Compliance 2010 (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.03
Faregate Integration (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$4,201.00
LVMC Office Furn. Fixtures & Computers (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$121,684.76
Other Depreciable Assets (incl automobiles) (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$213,252.07
Workshop Equipment (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$0.00
CCR Renovations (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).	\$0.00	\$88,202.50

Debtor Las Vegas Monorail Company
NameCase number (If known) 20-14451-nmc**Spares (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).**\$0.00\$0.00**Special Tools & Test Equipment (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).**\$0.00\$0.00**Leasehold Improvements (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).**\$0.00\$0.00**Customer Service Office (Amount currently shown herein is net book value. A market valuation of this asset has not yet been determined).**\$0.00\$26,278.9651. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$182,761,531.7252. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 9: Real property54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest****Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

Nature and extent of debtor's interest in property**Net book value of debtor's interest (Where available)****Valuation method used for current value****Current value of debtor's interest**

Debtor Las Vegas Monorail Company
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55.1.	MGM Grand Hotel Easement: Permanent Operations Easement (Exclusive and permanent easement in gross); APN's: 162-21-401-008; 162-21-401-009; 162-21-401-011; 162-21-401-013; 162-21-401-016; 162-21-401-022			\$0.00		Unknown
55.2.	Bally's Easement: Permanent Operations Easement (Exclusive and permanent easement in gross) APN's: 162-21-202-005; 162-21-202-009			\$0.00		Unknown
55.3.	Battista Property Easement: Permanent Operations Easement (Exclusive and permanent easement in gross) APN's: 162-21-11-001; 162-16-410-050; 162-16-410-051			\$0.00		Unknown
55.4.	Flamingo Hilton Easement: Permanent Operations Easement (Exclusive and permanent easement in gross) APN's: 162-16-401-033; 162-21-101-051			\$0.00		Unknown
55.5.	Nevada Power Easement: Permanent easement in gross. APN 162-21-101-003			\$0.00		Unknown

Debtor	Name	Case number (If known)
	Las Vegas Monorail Company	20-14451-nmc
55.6.	Ramada Villas/ Ramada Towers: Permanent Operations Easement (Exclusive and permanent easement in gross) APN's: 162-16-410-001; 162-16-410-052; 162-16-410-053; 162-16-410-054; 162-16-410-055	\$0.00
55.7.	Imperial Palace/ Harrah's Connection Easement, (Non-exclusive and permanent easements appurtenant to monorail Station): APN's 162-16-401-001 (Imperial Palace); 162-16-01-007 (Imperial Palace); 162-16-301-008 (Harrah's)	\$0.00
55.8.	Harrah's Easement: Permanent Operations Easement (Non-exclusive and permanent easement in gross) APN: 162-301-008	\$0.00
55.9.	Sahara Easements	\$0.00
55.10	Madison Tower Easements	\$0.00
55.11	Las Vegas Hilton Easements	\$0.00
55.12	LVCVA Easements	\$0.00
55.13	Chamber of Commerce Easements	\$0.00

Debtor **Las Vegas Monorail Company**
NameCase number (If known) **20-14451-nmc**56. **Total of Part 9.**Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.**\$0.00**57. **Is a depreciation schedule available for any of the property listed in Part 9?**☒ No☐ Yes58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**☒ No☐ Yes**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites			
	Domain Name: <u>lasvegasmonorail.org</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lvmonorail.com</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lvmonorail.net</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lvmonorail.org</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>vegasmonorail.org</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lasvegas-monorail.com</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lasvegasmonorail.us</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lasvegasmonorailsucks.net</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lasvegasmonorailsucks.org</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>lasvegasmonorail.com</u>	<u>\$0.00</u>		<u>Unknown</u>
	Domain Name: <u>las-vegas-monorail.com</u>	<u>\$0.00</u>		<u>Unknown</u>
62.	Licenses, franchises, and royalties			
	Monorail Franchise Agreement with Clark County	<u>\$0.00</u>		<u>Unknown</u>

Debtor Las Vegas Monorail Company
NameCase number (If known) 20-14451-nmc63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.0067. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.☒ Yes Fill in the information below.**Current value of
debtor's interest**71. **Notes receivable**
Description (include name of obligor)72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)73. **Interests in insurance policies or annuities**74. **Causes of action against third parties (whether or not a lawsuit
has been filed)**
**Judgment in Case No. A-18-782002-B in the Eighth
Judicial District Court (on appeal)**\$166,331.71**Nature of claim****Amount requested** \$0.0075. **Other contingent and unliquidated claims or causes of action of
every nature, including counterclaims of the debtor and rights to
set off claims**76. **Trusts, equitable or future interests in property**77. **Other property of any kind not already listed** *Examples:* Season tickets,
country club membership**2 bomb detecting dogs**Unknown**Curtis L. Myles****Due to Debtor for payment of premiums.**\$200,000.00

Debtor Las Vegas Monorail Company
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Barrick Neill	
Due to Debtor for payment of premiums.	\$90,000.00

Peter McCann	
Due to Debtor for payment of premiums.	\$120,000.00

Ingrid Reisman	
Due to Debtor for payment of premiums.	\$120,000.00

Simeon Salzman	
Due to Debtor for payment of premiums.	\$30,000.00

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$726,331.71

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**☒ No☐ Yes

Debtor **Las Vegas Monorail Company**
NameCase number (If known) **20-14451-nmc****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$10,562,009.08</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$2,766,638.49</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$11,512.40</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$182,761,531.72</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$726,331.71</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$196,828,023.40</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$196,828,023.40</u>

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

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Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Preston Hollow Capital, LLC <small>Creditor's Name</small> Attn: General Counsel / Director of Oper 1717 Main Street, Suite 3900 Dallas, TX 75201 <small>Creditor's mailing address</small> jdinan@phcllc.com; rstephens@phcllc.com <small>Creditor's email address, if known</small> Date debt was incurred October 15, 2019 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien 1st Tier Bondholder Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$20,500,000.00	\$0.00

2.2	U.S. Small Business Administration <small>Creditor's Name</small> Office of Disaster Assistance 14925 Kingsport Rd. Fort Worth, TX 76155 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred	Describe debtor's property that is subject to a lien Describe the lien SBA Loan; EIDL Program Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	\$150,000.00	\$0.00
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Debtor **Las Vegas Monorail Company**

Name

Case number (if known)

20-14451-nmc

Last 4 digits of account number

7910

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$20,650,000.
00****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address ADP PO BOX 31001-1874 Pasadena, CA 91110-1874	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Las Vegas Monorail Company Name	Case number (if known)	20-14451-nmc
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3.1	Nonpriority creditor's name and mailing address AAA Fire Protection Corporatio PO Box 43334 Las Vegas, NV 89116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$780.00
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3.2	Nonpriority creditor's name and mailing address Abbott's Custom Printing 411 Mark Leany Drive Henderson, NV 89011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$926.00
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3.3	Nonpriority creditor's name and mailing address ABM Building Services P.O. Box 52609 Los Angeles, CA 90074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,985.19
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3.4	Nonpriority creditor's name and mailing address Accordia Life and Annuity Company P.O. Box 71223 Charlotte, NC 28272-1223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.5	Nonpriority creditor's name and mailing address AFCO P.O. Box 360572 Pittsburgh, PA 15250-6572 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,462.08
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3.6	Nonpriority creditor's name and mailing address Ahern Rentals PO Box 271390 Las Vegas, NV 89127-1390 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$652.50
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3.7	Nonpriority creditor's name and mailing address Airgas USA, LLC PO Box 102289 Pasadena, CA 91189 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,368.50
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3.8	Nonpriority creditor's name and mailing address Alarmco 2007 Las Vegas Blvd So. Las Vegas, NV 89104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,200.00
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3.9	Nonpriority creditor's name and mailing address Alliance F&M 1721 Ives Avenue Oxnard, CA 93033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,137.35
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3.10	Nonpriority creditor's name and mailing address Allied Electronics P.O. Box 2325 Fort Worth, TX 76113-2325 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.94
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3.11	Nonpriority creditor's name and mailing address Allied Refrigeration Inc. P.O. Box 2411 Long Beach, CA 90801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.00
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3.12	Nonpriority creditor's name and mailing address Altec Industries, Inc PO Box 11407 Birmingham, AL 35246-0414 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,256.12
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3.13	Nonpriority creditor's name and mailing address AMERICAN EXPRESS BOX 0001 Los Angeles, CA 90096-8000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$364,572.78
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3.14	Nonpriority creditor's name and mailing address Arcpoint 3365 East Flamingo Road Suite 4 Las Vegas, NV 89121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,650.00
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3.15	Nonpriority creditor's name and mailing address Armstrong Teasdale LLP 3770 Howard Hughes Pkwy, Suite 200 Las Vegas, NV 89169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,623.36
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3.16	Nonpriority creditor's name and mailing address Assured Document Management 8050 S. Arville Street Suite 105 Las Vegas, NV 89139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.34
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3.17	Nonpriority creditor's name and mailing address Austin Hardware & Supply, Inc Dept CH 19373 Palatine, IL 60055-9373 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$936.94
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3.18	Nonpriority creditor's name and mailing address Automatic Systems America, Inc 4005 Boul. Matte, Local D Brossard, QC J4Y 2P4 Quebec, Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,904.20
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3.19	Nonpriority creditor's name and mailing address Balfour Beatty Rail 600 Galleria Parkway, Suite 15 Atlanta, GA 30339 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,533.00
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3.20	Nonpriority creditor's name and mailing address Bank of Nevada PO Box 98809 Las Vegas, NV 89193 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,510.54
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3.21	Nonpriority creditor's name and mailing address Barrick J. Neill 8442 Canyon Sun Court Las Vegas, NV 89166 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deferred compensation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.22	Nonpriority creditor's name and mailing address Bearcom PO BOX 670354 Dallas, TX 75267-0354 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.51
3.23	Nonpriority creditor's name and mailing address BPGraphics, Inc. 3940 W Montecito Avenue Phoenix, AZ 85019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89,900.32
3.24	Nonpriority creditor's name and mailing address Brink's, Incorporated 7373 Solutions Center Chicago, IL 60677-7003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,994.32
3.25	Nonpriority creditor's name and mailing address Brush Industries, Inc PO Box 638 Sunbury, PA 17801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,075.00
3.26	Nonpriority creditor's name and mailing address CA Group, Inc. 2785 S. Rainbow Blvd Las Vegas, NV 89146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,057.50
3.27	Nonpriority creditor's name and mailing address Canada Alloy Castings Inossman North America Corp. 529 Manitou Dr. Kitchener Ontario N2C 1S2 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$211,664.00
3.28	Nonpriority creditor's name and mailing address Candid Communications LLC 4071 Wild Eagle Circle Las Vegas, NV 89129 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,000.00

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3.29	Nonpriority creditor's name and mailing address Candid Litho Printing Ltd. Candid Worldwide LLC. 210 Route 109 Farmingdale, NY 11735 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,635.00
3.30	Nonpriority creditor's name and mailing address Carol Cencer P.O. Box 1361 Overton, NV 89040 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19.00
3.31	Nonpriority creditor's name and mailing address Cashman Equipment PO Box 843397 Los Angeles, CA 90084-3397 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,668.24
3.32	Nonpriority creditor's name and mailing address Centurylink PO Box 52187 Phoenix, AZ 85072-2187 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$805.71
3.33	Nonpriority creditor's name and mailing address Cintas P.O BOX 29059 Phoenix, AZ 85038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,046.32
3.34	Nonpriority creditor's name and mailing address Cintas P.O BOX 29059 Phoenix, AZ 85038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,752.45
3.35	Nonpriority creditor's name and mailing address Clark County Dept of Business 500 S Grand Central Pkwy P.O. Box 551810 Las Vegas, NV 89155-1810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,309.00

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3.36	Nonpriority creditor's name and mailing address College of Southern Nevada Cashier's Office 6375 W. Charleston Blvd WCM101 Las Vegas, NV 89146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$220.00
3.37	Nonpriority creditor's name and mailing address Commercial Lighting & Supply, Inc. 726 Dean Martin Drive 900 Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$538.00
3.38	Nonpriority creditor's name and mailing address Controlled Motion Solutions 911 N. Poinsettia Street Santa Ana, CA 92701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,763.87
3.39	Nonpriority creditor's name and mailing address Cox Communications PO BOX 53262 Phoenix, AZ 85072-3262 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$407.75
3.40	Nonpriority creditor's name and mailing address Crawford Door Sales of Nevada Limited 6225 S. Valley View Blvd #D Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,145.88
3.41	Nonpriority creditor's name and mailing address Culligan Water of Las Vegas 4513 N Lamb Blvd, Ste 92 Las Vegas, NV 89115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107.82
3.42	Nonpriority creditor's name and mailing address Curtis L. Myles, III 11278 Winter Cottage Place Las Vegas, NV 89135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deferred compensation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,000.00

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3.43	Nonpriority creditor's name and mailing address Dell Fastener Corporation 1901 Mayview Road Unit 8 Bridgeville, PA 15017 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$566.90
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3.44	Nonpriority creditor's name and mailing address Desert Fire Protection, L.P 5040 Sobb Avenue Las Vegas, NV 89118 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,168.49
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3.45	Nonpriority creditor's name and mailing address Directv P O BOX 5006 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.93
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3.46	Nonpriority creditor's name and mailing address DLP Services, LLC 5113 Alpine Place Las Vegas, NV 89107 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,687.92
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3.47	Nonpriority creditor's name and mailing address Dolphin Machine, Inc 2939 Brookspark Dr. North Las Vegas, NV 89030 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,300.00
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3.48	Nonpriority creditor's name and mailing address Dratter Electric Motors 2681 Industrial Rd Las Vegas, NV 89109 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,078.44
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3.49	Nonpriority creditor's name and mailing address Emcor Services Nevada 2 Cromwell Irvine, CA 92618 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,788.00
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3.50	Nonpriority creditor's name and mailing address Enzi's All American Cleaning 6420 W. Spring Mountain Rd Las Vegas, NV 89146 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,200.00
3.51	Nonpriority creditor's name and mailing address Fed Ex Freight Dept LA Po Box 21415 Pasadena, CA 91185-1415 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$253.11
3.52	Nonpriority creditor's name and mailing address First Insurance Funding P.O. Box 7000 Carol Stream, IL 60197 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,592.32
3.53	Nonpriority creditor's name and mailing address Flight Centre Travel Group 275 Grey Street South Brisbane QLD 4101 Australia Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,012.90
3.54	Nonpriority creditor's name and mailing address Fluoro-Plastics 3601 G Street Philadelphia, PA 19134-1320 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,375.00
3.55	Nonpriority creditor's name and mailing address Gallagher Bassett Services, In 15763 Collections Center Dr Chicago, IL 60693 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,077.00
3.56	Nonpriority creditor's name and mailing address Gateway Fire & Security, LLC 998 Leadville Meadows Dr. Henderson, NV 89052 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,052.90

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3.57	Nonpriority creditor's name and mailing address Gensler of Nevada 3883 Howard Hughes Parkway Suite 650 Las Vegas, NV 89169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150,697.26
3.58	Nonpriority creditor's name and mailing address Gilbert Precision Machine, Inc 2685 Sammy Davis Jr. Dr. Las Vegas, NV 89109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,199.90
3.59	Nonpriority creditor's name and mailing address Google, Inc. Dept. 33654 P.O. Box 39000 San Francisco, CA 94139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,347.25
3.60	Nonpriority creditor's name and mailing address Grainger 2401 Western Ave Las Vegas, NV 89102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,220.74
3.61	Nonpriority creditor's name and mailing address Green Electrical Supply, LLC 2935 Waterview Dr Rochester, MI 48309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$134.64
3.62	Nonpriority creditor's name and mailing address Hall Jaffe & Clayton, LLP 7425 Peak Drive Las Vegas, NV 89128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,078.71
3.63	Nonpriority creditor's name and mailing address Hamilton Blake, LLC 4325 W. Patrick Lane Suite 105 Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,280.00

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3.64	Nonpriority creditor's name and mailing address Health Plan of Nevada 2716-4 N Tenaya Way Las Vegas, NV 89128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,838.17
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3.65	Nonpriority creditor's name and mailing address Hercules SLR 520 Windmill Road Dartmouth NS B3B 1B3 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$777.86
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3.66	Nonpriority creditor's name and mailing address Horton Automatics PO Box 676576 Dallas, TX 75267-6576 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$341.52
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3.67	Nonpriority creditor's name and mailing address Hubner Manufacturing Corp. 450 Wando Park Blvd Mount Pleasant, SC 29464 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,408.00
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3.68	Nonpriority creditor's name and mailing address Ingrid Reisman 10593 Garden Light Drive Las Vegas, NV 89169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deferred compensation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.69	Nonpriority creditor's name and mailing address Innova Technologies Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$391.50
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3.70	Nonpriority creditor's name and mailing address JFW Industries, Inc. 5134 Commerce Square Drive Indianapolis, IN 46237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$695.50
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3.71	Nonpriority creditor's name and mailing address John S. James Co. P.O Box 2166 Savannah, GA 31402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,172.23
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3.72	Nonpriority creditor's name and mailing address Jordan Newsom 15241 Delaware Street Broomfield, CO 80023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
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3.73	Nonpriority creditor's name and mailing address Kaempfer Crowell 1980 Festival Plaza Dr #650 Las Vegas, NV 89135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,718.50
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3.74	Nonpriority creditor's name and mailing address Kiesub Electronics 3185 S. Highland Dr Las Vegas, NV 89109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,159.44
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3.75	Nonpriority creditor's name and mailing address Knorr Brake Company 1 Arthur Peck Drive Westminster, MD 21157 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,143.17
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3.76	Nonpriority creditor's name and mailing address Las Vegas Color Graphics, Inc. 4265 W SUNSET RD Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,376.00
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3.77	Nonpriority creditor's name and mailing address Laz Parking, Nevada LLC P.O. Box 847370 Los Angeles, CA 90084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110.00
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3.78	Nonpriority creditor's name and mailing address Levy Online 5905 S Decatur Blvd #1 Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,450.00
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3.79	Nonpriority creditor's name and mailing address Masters of Barricades, LLC, 3624 Goldfield Street North Las Vegas, NV 89032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,623.45
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3.80	Nonpriority creditor's name and mailing address McMaster-Carr PO Box 7690 Chicago, IL 60680-7690 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$178.65
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3.81	Nonpriority creditor's name and mailing address Mersen 225 Harwood Boulevard Vaudreuil-Dorion Quebec Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,338.60
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3.82	Nonpriority creditor's name and mailing address Micar Fabrication 5166 S. Arville Street Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,963.00
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3.83	Nonpriority creditor's name and mailing address Michael Fernandez Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201.60
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3.84	Nonpriority creditor's name and mailing address Michelin North America, Inc 12398 Collections Center Dr Chicago, IL 60693-0398 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,653.20
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3.85	Nonpriority creditor's name and mailing address Microsoft Online Inc. P.O. Box 847543 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,910.06
<hr/>			
3.86	Nonpriority creditor's name and mailing address Millennium Digital Technologies, LLC 655 West 13 Mile Road Madison Heights, MI 48071 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,140.00
<hr/>			
3.87	Nonpriority creditor's name and mailing address Motion Industries Box 504606 Saint Louis, MO 63150 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,373.85
<hr/>			
3.88	Nonpriority creditor's name and mailing address Motors & More 2950 S. Highland Dr Ste. A Las Vegas, NV 89109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28.00
<hr/>			
3.89	Nonpriority creditor's name and mailing address MSC Industrial Supply Co. PO Box 953635 Saint Louis, MO 63195 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68.24
<hr/>			
3.90	Nonpriority creditor's name and mailing address MTM Power Messtechnik Mellen Back GmbH Zirkel 3 D-98746 Mellenback Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,475.91
<hr/>			
3.91	Nonpriority creditor's name and mailing address Myers Tire Supply PO Box 100169 Pasadena, CA 91189-0169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99.96

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3.92	Nonpriority creditor's name and mailing address Nevada International Trade Co., FTZ 6650 S. Spencer St. Suite 110 Las Vegas, NV 89119 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
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3.93	Nonpriority creditor's name and mailing address Nevada Tactical 3776 E. Flamingo Road Las Vegas, NV 89121 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.15
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3.94	Nonpriority creditor's name and mailing address New Pig One Pork Ave Tipton, PA 16684-0304 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,547.00
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3.95	Nonpriority creditor's name and mailing address Newark Element14 33190 Collection Center Drive Chicago, IL 60693 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81.09
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3.96	Nonpriority creditor's name and mailing address NV Energy Attn: Land Development 6226 W. Sahara Ave. Mailstop 9 Las Vegas, NV 89151 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$132,964.71
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3.97	Nonpriority creditor's name and mailing address Omega Engineering, Inc 26904 Network Place Chicago, IL 60673-1269 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$460.00
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3.98	Nonpriority creditor's name and mailing address Panel Components & Systems 149 Main Street Stanhope, NJ 07874 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,850.00
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3.99	Nonpriority creditor's name and mailing address PEP BOYS PO Box 8500-50445 Philadelphia, PA 19178-0445 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.30
3.100	Nonpriority creditor's name and mailing address Peter McCann 3432 Iberia Street Las Vegas, NV 89146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deferred compensation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
3.101	Nonpriority creditor's name and mailing address Pharris Media, Inc. 200 S. Wilcox Street Suite 201 Castle Rock, CO 80104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,000.00
3.102	Nonpriority creditor's name and mailing address PowerTech Converter GMBH GmbH Am Borsigturm 100 13507, Berlin Germany Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,498.04
3.103	Nonpriority creditor's name and mailing address PowerTech Converts Corp 300 International Drive North Suite #2 Budd Lake, NJ 07828 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,539.41
3.104	Nonpriority creditor's name and mailing address Projetechn, Inc. 3815 Harrison Avenue Cincinnati, OH 45211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,490.80
3.105	Nonpriority creditor's name and mailing address QUEST DIAGNOSTICS PO BOX 740709 Atlanta, GA 30374-0709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00

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3.106	Nonpriority creditor's name and mailing address Quill.com P.O. Box 37600 Philadelphia, PA 19101-0600 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$693.34
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3.107	Nonpriority creditor's name and mailing address Rebel Oil Co., Inc 2200 S. Highland Dr Las Vegas, NV 89102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$775.55
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3.108	Nonpriority creditor's name and mailing address Republic Services #620 PO Box 78829 Phoenix, AZ 85062-8829 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,225.55
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3.109	Nonpriority creditor's name and mailing address River City Petroleum 3775 N Freeway, Suite 101 Sacramento, CA 95834 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,321.67
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3.110	Nonpriority creditor's name and mailing address Rogelberg Getriebe Am Rogelberg 10 D-49716 Meppen Meppen, Germany Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,320.13
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3.111	Nonpriority creditor's name and mailing address RollCall PO BOX 744313 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$132.18
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3.112	Nonpriority creditor's name and mailing address Rubin Brown LLP P.O. Box 790379 Saint Louis, MO 63179 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,600.00
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Debtor	Las Vegas Monorail Company Name	Case number (if known)	20-14451-nmc
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3.113	Nonpriority creditor's name and mailing address Safe Electronics 2441 Western Ave Las Vegas, NV 89102-4815 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$776.00
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3.114	Nonpriority creditor's name and mailing address Safety Kleen Systems, Inc PO Box 7170 Pasadena, CA 91109-7170 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,882.74
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3.115	Nonpriority creditor's name and mailing address Saft America, Inc PO Box 734150 Dallas, TX 75373 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$956.00
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3.116	Nonpriority creditor's name and mailing address Scheidt & Bachmann, USA Inc. 1001 Pawtucket Blvd #270 Lowell, MA 01854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,293.60
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3.117	Nonpriority creditor's name and mailing address Screaming Images 6975 S. Decatur Blvd. Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,789.80
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3.118	Nonpriority creditor's name and mailing address Security Life of Denver Insura 8408 Innovation Way Chicago, IL 60682 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140,000.00
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3.119	Nonpriority creditor's name and mailing address Selectron Systems AG Bernstrasse 70 CH-3250 Lyss Lyss, Switzerland Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,830.29
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Debtor	Las Vegas Monorail Company Name	Case number (if known)	20-14451-nmc
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3.120	Nonpriority creditor's name and mailing address Simeon Salzman 12241 Nasino Ave. Las Vegas, NV 89138 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deferred compensation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.121	Nonpriority creditor's name and mailing address Sky High Marketing 259 W Broadway Waukesha, WI 53186 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,164.25
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3.122	Nonpriority creditor's name and mailing address Sojern Inc. 18135 Burke St. 3rd Floor Elkhorn, NE 68022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,045.90
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3.123	Nonpriority creditor's name and mailing address Southwest Gas Corporation P O BOX 98890 Las Vegas, NV 89150-0101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,948.12
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3.124	Nonpriority creditor's name and mailing address SpaceCraft Components Corp. 3040 Clayton St. North Las Vegas, NV 89032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,047.35
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3.125	Nonpriority creditor's name and mailing address Stage 8 Fasteners, Inc. 4318 Redwood Hwy, Suite 200 San Rafael, CA 94903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$380.00
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3.126	Nonpriority creditor's name and mailing address Stanley Consultants, Inc. 225 Iowa Avenue Muscatine, IA 52761 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,310.00
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Debtor	Las Vegas Monorail Company <small>Name</small>	Case number (if known)	20-14451-nmc
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3.127	Nonpriority creditor's name and mailing address Sudden Impact Pest Control P.O. Box 29125 Las Vegas, NV 89126 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
3.128	Nonpriority creditor's name and mailing address Sullivan Commercial Painting, Inc. 1089 Commonwealth Avenue Suite 196 Boston, MA 02215 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,874.50
3.129	Nonpriority creditor's name and mailing address T-Mobile P O BOX 790047 Saint Louis, MO 63179 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$173.95
3.130	Nonpriority creditor's name and mailing address Team One Repair, Inc. 2705 Crestridge Court Suwanee, GA 30024 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,303.62
3.131	Nonpriority creditor's name and mailing address Total Source Officeworks 625 W.Katella Ave. Suite 34 Orange, CA 92867 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$443.49
3.132	Nonpriority creditor's name and mailing address TPC Wire and Cable Corp 8387 Solutions Center Chicago, IL 60677 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,687.50
3.133	Nonpriority creditor's name and mailing address Trigger Creative Services LLC Attn: Tristan Diehl, Owner 1545 Porterfield Lane Las Vegas, NV 89183 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

Debtor	Las Vegas Monorail Company Name	Case number (if known)	20-14451-nmc
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3.134	Nonpriority creditor's name and mailing address Uline, Inc. P.O. Box 88741 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,306.93
3.135	Nonpriority creditor's name and mailing address Verizon Connect NWF, Inc. PO Box 975544 Dallas, TX 75397 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.40
3.136	Nonpriority creditor's name and mailing address Verizon Wireless Legal & External Affairs Dept. One Verizon Way, VC52S401 Basking Ridge, NJ 07920-1097 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,280.41
3.137	Nonpriority creditor's name and mailing address WaterTech, Inc. 2536 Kimberly Road Twin Falls, ID 83301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.138	Nonpriority creditor's name and mailing address Waxie Sanitary Supply PO Box 748802 Los Angeles, CA 90074-8802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,824.64
3.139	Nonpriority creditor's name and mailing address Wesco Aircraft Hardware Corp P.O. Box 734341 Dallas, TX 75373 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,792.00
3.140	Nonpriority creditor's name and mailing address Xerox Financial Services LLC 45 Glover Avenue Norwalk, CT 06856 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,509.27

Debtor	Las Vegas Monorail Company <small>Name</small>	Case number (if known)	20-14451-nmc
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3.141	Nonpriority creditor's name and mailing address XPO Global Forwarding, Inc. 27839 Network Place Chicago, IL 60673-1278 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,084.14
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3.142	Nonpriority creditor's name and mailing address XPO Logistics Freight, Inc. 29559 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,218.00
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 2,145,541.17
5c.	\$ 2,145,541.17

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal**Property*

(Official Form 206A/B).

2. List all contracts and unexpired leases**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Payroll Services**

State the term remaining

List the contract number of any government contract

**ADP Inc.
504 Clinton Center Dr.
Sutie 4400
GA 30956**2.2. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Property**

State the term remaining

List the contract number of any government contract

AIG2.3. State what the contract or lease is for and the nature of the debtor's interest **Cell Tower Lease**

State the term remaining

List the contract number of any government contract

AT&T2.4. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreement**

State the term remaining

List the contract number of any government contract

**Barrick J. Neill
8442 Canyon Sun Court
Las Vegas, NV 89166**

Debtor 1 **Las Vegas Monorail Company**

First Name

Middle Name

Last Name

Case number (if known) **20-14451-nmc****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.5. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Workers Compensation**

State the term remaining

List the contract number of any government contract

Berkshire Hathaway

- 2.6. State what the contract or lease is for and the nature of the debtor's interest **Corporate Office Lease
3770 Howard Hughes Parkway, Suite 295, Las Vegas, NV 89169**

State the term remaining

List the contract number of any government contract

**BRE/HC Las Vegas Property Holdings L.L.C
3800 Howard Hughes Parkway
Suite 150
Las Vegas, NV 89169**

- 2.7. State what the contract or lease is for and the nature of the debtor's interest **Centurylink Total Advantage Express Agreement**

State the term remaining

List the contract number of any government contract

Centurylink

- 2.8. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Comprehensive Crime**

State the term remaining

List the contract number of any government contract

Chubb

- 2.9. State what the contract or lease is for and the nature of the debtor's interest **Franchise Agreement**

State the term remaining

List the contract number of any government contract

**Clark County, Nevada
Director of Administrative Services
500 S. Grand Central Pkwy.,
P.O. Box 551712
Las Vegas, NV 89155-1712**

- 2.10. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Cyber**

State the term remaining

List the contract number of any government contract

Corvus

Debtor 1 **Las Vegas Monorail Company**

First Name

Middle Name

Last Name

Case number (if known) **20-14451-nmc****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.11. State what the contract or lease is for and the nature of the debtor's interest **Commerical Services Agreement**

State the term remaining

List the contract number of any government contract

Cox Communications

- 2.12. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreement**

State the term remaining

List the contract number of any government contract

**Curtis L. Myles, III
11278 Winter Cottage Place
Las Vegas, NV 89135**

- 2.13. State what the contract or lease is for and the nature of the debtor's interest **Fire and Life Safety System**

State the term remaining

List the contract number of any government contract

Gateway Fire & Security, LLC

- 2.14. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreement**

State the term remaining

List the contract number of any government contract

**Ingrid Reisman
10593 Garden Light Drive
Las Vegas, NV 89169**

- 2.15. State what the contract or lease is for and the nature of the debtor's interest **KONE Care Maintenance Agreement**

State the term remaining

List the contract number of any government contract

**KONE Inc.
1660 Helm Dr.
Las Vegas, NV 89119**

- 2.16. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Terrorism**

Lloyds of London

Debtor 1 **Las Vegas Monorail Company**

First Name

Middle Name

Last Name

Case number (if known) **20-14451-nmc****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

- 2.17. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Commercial General Liability**

State the term remaining

List the contract number of any government contract _____

Lloyds of London

- 2.18. State what the contract or lease is for and the nature of the debtor's interest **Hand-Held Radio Service**

State the term remaining

List the contract number of any government contract _____

Motorola

- 2.19. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Comprehensive Crime**

State the term remaining

List the contract number of any government contract _____

Penn-Star

- 2.20. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreement**

State the term remaining

List the contract number of any government contract _____

**Peter McCann
3432 Iberia Street
Las Vegas, NV 89146**

- 2.21. State what the contract or lease is for and the nature of the debtor's interest **Brokerage Agreement**

State the term remaining

List the contract number of any government contract _____

**Pharris Media, Inc.
200 South Wilcox Street
Suite 201
Castle Rock, CO 80104**

Debtor 1 **Las Vegas Monorail Company**

First Name

Middle Name

Last Name

Case number (if known) **20-14451-nmc****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.22. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Security Services GL Package**

State the term remaining

List the contract number of any government contract

Philadelphia

- 2.23. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Commercial Auto**

State the term remaining

List the contract number of any government contract

Philadelphia

- 2.24. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Security Services Umbrella**

State the term remaining

List the contract number of any government contract

Philadelphia

- 2.25. State what the contract or lease is for and the nature of the debtor's interest **Maximo Software License**

State the term remaining

List the contract number of any government contract

Projetechn

- 2.26. State what the contract or lease is for and the nature of the debtor's interest **Development Agreement**

State the term remaining

List the contract number of any government contract

Robert Manzo

- 2.27. State what the contract or lease is for and the nature of the debtor's interest **Employment Agreement**

State the term remaining

List the contract number of any

**Simeon Salzman
12241 Nasino Ave.
Las Vegas, NV 89138**

Debtor 1 **Las Vegas Monorail Company**

First Name

Middle Name

Last Name

Case number (if known) **20-14451-nmc****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.28. State what the contract or lease is for and the nature of the debtor's interest **Maintenance Support Services**

State the term remaining

List the contract number of any government contract

Thales

- 2.29. State what the contract or lease is for and the nature of the debtor's interest **Verizon Wireless Major Account Agreement**

State the term remaining

List the contract number of any government contract

**Verizon Wireless
Legal & External Affairs Dept.
One Verizon Way, VC52S401
Basking Ridge, NJ 07920-1097**

- 2.30. State what the contract or lease is for and the nature of the debtor's interest **Lease for OMSF Location Operations, Maintenance and Storage Facility
2575 Joe W. Brown Drive, Las Vegas, Nevada 89109 (APN 162-10-101-005)**

State the term remaining

List the contract number of any government contract

World Buddhism Association Headquarters

- 2.31. State what the contract or lease is for and the nature of the debtor's interest **Cost Per Copy Agreement**

State the term remaining

List the contract number of any government contract

**Xerox Financial Services LLC
45 Glover Avenue
Norwalk, CT 06856**

- 2.32. State what the contract or lease is for and the nature of the debtor's interest **Cost Per Impression Agreement**

State the term remaining

List the contract number of any government contract

**Xerox Financial Services LLC
45 Glover Avenue
Norwalk, CT 06856**

Debtor 1 **Las Vegas Monorail Company**
First Name Middle Name Last Name

Case number (if known) **20-14451-nmc**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.33. State what the contract or lease is for and the nature of the debtor's interest **Insurance Policy - Director & Officer (EPLI)**

State the term remaining

List the contract number of any government contract

XL Specialty

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

	Name	Mailing Address	Name	Check all schedules that apply:
2.1		Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City State Zip Code		
2.2		Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City State Zip Code		
2.3		Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City State Zip Code		
2.4		Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		City State Zip Code		

Fill in this information to identify the case:Debtor name Las Vegas Monorail CompanyUnited States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 20-14451-nmc☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2020 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$5,962,760.00

For prior year:
From 1/01/2019 to 12/31/2019

☒ Operating a business
☐ Other _____

\$22,371,532.00

For year before that:
From 1/01/2018 to 12/31/2018

☒ Operating a business
☐ Other _____

\$21,229,483.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue**

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value**

Reasons for payment or transfer
Check all that apply

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Ballard Rawson, Chartered	6/16/2020, 8/20/2020, 9/3/2020	\$115,169.12	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. David Garza, Jr. v. LVMC			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Sweney v. Las Vegas Monorail Company A-20-808846-C	Personal Injury	Eighth Judicial District Court Regional Justice Center 200 Lewis Avenue Las Vegas, NV 89101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3. Wold Buddhism Association Headquarters v. LVMC 80858/81069	Declaratory Judgment	Nevada Supreme Court 408 East Clark Avenue Las Vegas, NV 89101	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc****8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Garman Turner Gordon LLP 7251 Amigo Street, Suite 210 Las Vegas, NV 89119		08/10/2020	\$50,000.00
Email or website address https://gtg.legal/			
Who made the payment, if not debtor?			

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.2.	Alvarez & Marsal North America, LLC 2029 Centiry Park East Suite 2060 Los Angeles, CA 90067		09/03/2020	\$150,000.00
	Email or website address https://www.alvarezandmarsal.com			
	Who made the payment, if not debtor?			
11.3.	Garman Turner Gordon LLP 7251 Amigo Street, Suite 210 Las Vegas, NV 89119		08/20/2020	\$25,000.00
	Email or website address https://gtg.legal/			
	Who made the payment, if not debtor?			
11.4.	Garman Turner Gordon LLP 7251 Amigo Street, Suite 210 Las Vegas, NV 89119		09/03/2020	\$350,000.00
	Email or website address https://gtg.legal/			
	Who made the payment, if not debtor?			
11.5.	Alvarez & Marsal North America, LLC 2029 Centiry Park East Suite 2060 Los Angeles, CA 90067		08/28/2020	\$75,000.00
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc**☒ None.Who received transfer?
AddressDescription of property transferred or
payments received or debts paid in exchangeDate transfer
was madeTotal amount or
value**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

Las Vegas Monorail Company 401(k) Plan

Employer identification number of the plan

EIN: **88-0471789**

Has the plan been terminated?

☒ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Assured Document Storage 8050 S. Arville Street Suite 105 Las Vegas, NV 89139	Curtis L. Myles III Pete McCann Chandy Som	Previous year's Accounts Payable and Payroll files.	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No.

☐ Yes. Provide details below.

Debtor Las Vegas Monorail CompanyCase number (if known) 20-14451-nmc

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☒ None

Name and address	Date of service From-To
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26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26b.1. BDO LLP PO Box 677973 Dallas, TX 75267	2015 - 2020

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☒ None

Name and address	If any books of account and records are unavailable, explain why
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26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

- ☐ None

Name and address

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc****Name and address**

26d.1. **Preston Hollow Capital LLC**
1717 Main Street, Suite 3900
Dallas, TX 75201

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☐ No
- ☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Barrick Neill	January 4/5, 2020	\$1,641,382.54
	Name and address of the person who has possession of inventory records		
	Barrick Neill 3770 Howard Hughes Parkway, Suite 295 Las Vegas, NV 89169		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Curtis L. Myles III	3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	President and CEO	0%
Name	Address	Position and nature of any interest	% of interest, if any
Pete McCann	3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	Chief Operating Officer	0%
Name	Address	Position and nature of any interest	% of interest, if any
Ingrid Reisman	3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	Chief Marketing Officer	0%
Name	Address	Position and nature of any interest	% of interest, if any
Barrick Neill	3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	VP of Operations	0%
Name	Address	Position and nature of any interest	% of interest, if any
Simeon Salzman	3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	Chief Financial Officer	0%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
- ☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Debtor **Las Vegas Monorail Company**Case number (if known) **20-14451-nmc**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Curtis L. Myles III 3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	\$76,661.95	12/13/2019	2019 Annual Bonus
	Relationship to debtor President and CEO			
30.2	Pete McCann 3770 Howard Hughes Pkwy, Suite 295 Las Vegas, NV 89169	\$40,629.65	12/13/2019	2019 Annual Bonus
	Relationship to debtor Chief Operating Officer			
30.3	Barrick J. Neill 8442 Canyon Sun Court Las Vegas, NV 89166	\$31,859.09	12/13/2020	2019 Annual Bonus
	Relationship to debtor VP of Operations			
30.4	Ingrid Reisman 10593 Garden Light Drive Las Vegas, NV 89169	\$35,849.70	12/13/2019	2019 Annual Bonus
	Relationship to debtor Chief Marketing Officer			
30.5	Simeon Salzman 12241 Nasino Ave. Las Vegas, NV 89138	\$18,000	12/13/2019	2019 Annual Bonus
	Relationship to debtor Chief Financial Officer			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Debtor Las Vegas Monorail CompanyCase number (if known) 20-14451-nmc

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 21, 2020

/s/ Curtis L. Myles III

Signature of individual signing on behalf of the debtor

Curtis L. Myles III

Printed name

Position or relationship to debtor President and CEO of Las Vegas Monorail Company

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

**United States Bankruptcy Court
District of Nevada**

In re **Las Vegas Monorail Company**

Debtor(s)

Case No. **20-14451-nmc**
Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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-NONE-

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President and CEO of Las Vegas Monorail Company** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **September 21, 2020**Signature **/s/ Curtis L. Myles III**
Curtis L. Myles III

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

Name, Address, Telephone No. & I.D. No.

Gerald M. Gordon 0229
7251 Amigo Street, Suite 210
Las Vegas, NV 89119
725-777-3000
0229 NV

UNITED STATES BANKRUPTCY COURT

District of Nevada

In Re

Las Vegas Monorail Company

Debtor(s)

BANKRUPTCY NO. **20-14451-nmc**
 CHAPTER NO. **11**

**DECLARATION RE: ELECTRONIC FILING OF PETITION
 SCHEDULES, STATEMENTS AND PLAN (if applicable)**

PART I - DECLARATION OF PETITIONER

I [We] **Curtis L. Myles III** and _____, the undersigned debtor(s) hereby declare under penalty of perjury that the information I have given my attorney and the information provided in the electronically filed petition, statements, schedules, amendments and plan (if applicable) as indicated above is true and correct. I consent to my attorney filing my petition, this declaration, statements, schedules and plan (if applicable) as indicated above to the United States Bankruptcy Court. I understand that this DECLARATION RE: ELECTRONIC FILING is to be filed with the Clerk once all schedules have been filed electronically but, in no event, no later than 15 days following the date the petition was electronically filed. I understand that failure to file the signed original of this DECLARATION will cause my case to be dismissed pursuant to 11 U.S.C. § 707(a)(3) without further notice.

- ☐ If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7 or 13. I am aware that I may proceed under chapter 7, 11, 12, or 13 of 11 United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7 or 13. I request relief in accordance with the chapter specified in this petition.
- ☒ [If petitioner is a corporation or partnership] I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in this petition.

Dated: **September 21, 2020**

Signed: **/s/ Curtis L. Myles III**
Curtis L. Myles III/President and CEO of Las Vegas Monorail Company
 (Applicant)

PART II - DECLARATION OF ATTORNEY

I, the attorney for the petitioner named in the foregoing petition, declare that, I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Dated: **September 21, 2020**

Signed: **/s/ Gerald M. Gordon**
Gerald M. Gordon 0229
 Attorney for Debtor(s)